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## UTILITY PATENT APPLICATION **TRANSMITTAL**

115

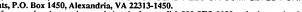
(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

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Attomey Docket No.	03-274	ì	þ
First Inventor	Shamine	<u>が</u>	でエ
Title	Fuel System With Leak Location Diagnostic Features And Component For Same	,	9 / (
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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450					
See MPEP chapter 600 concerning utility patent application contents.  1.  Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)  2.  Applicant claims small entity status. See 37 CFR 1.27.  3.  Specification [Total Pages 16] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Summary of the Invention - Brief Description of the Drawings ( if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4.  Drawing(s) (35 U.S.C.113) [Total Sheets 3] 5. Oath or Declaration [Total Sheets 1]  a.  Newly executed (original or copy) b.  Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed)  i.  DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR				P.O. Box 1450 Alexandria VA 22313-1450  7. □ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. □ Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. □ CD-ROM or CD-R (2 copies); or  ii. □ Paper  c. □ Statements verifying identity of above copies  ACCOMPANYING APPLICATIONS PARTS  9. ☒ Assignment Papers (cover sheet & document(s))  10. □ 37 C.F.R. 3.73(b) Statement ☒ Power of (when there is an assignee) Attorney  11. □ English Translation Document (if applicable)  12. ☒ Information Disclosure ☒ Copies of IDS Statement (IDS)/PTO-1449 Citations  13. □ Preliminary Amendment  14. □ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. □ Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. □ Nonpublication Request under 35 U.S.C. 122					
1.63(d)(2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76			(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  17.  Other:						
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) of prior application No:  Prior application information: Examiner  For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Bot is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can be relied upon when a portion has been inadvertently omitted from the submitted application parts.						io:/			
19. CORRESPONDENCE ADDRESS									
☐ Custom	er Number						OR 🛛 C	Correspondence address below	
Name Michael B. McNeil									
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P.O. Box 2417									
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Country	USA		Teleph	one	812-333-53	355	Fax	812-333-3173	
Name (Print/	Туре)	Michael B. McNe	eil /	9 F	Registration N	lo. (Attorney/Ag	ent)	35,949	
Signature		AN	15	9	X	1	Date	10-22-03	

This collection of information is required by 37 CRR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.







## **FEE TRANSMITTAL** for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	8

	Complete if Known	
Application Number		
Filing Date		
First Named Inventor	Shamine	
Examiner Name		
Art Unit		
Attornov Dookst No	03-274	

METHOD OF PAYMENT (check all that apply)					FEE C	ALCULATION (continued)		
			DITION	ALI FE				
⊠ Check    ☐ Credit card    ☐ Money    ☐ Other    ☐ None     Order								
☐ Deposit Account:			Entity	Small	Entity			
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Deposit		Code	(\$)	Code	(\$)			
Account 500226 Number		1051 1052	130 50	2051 2052	65 25	Surcharge - late filing fee or oath	<b></b>	
Nulliber		1052	50	2422	25	Surcharge - late provisional filing fee or cover sheet.		
Deposit		1053	130	1053	130	Non-English specification		
Account		1812	2,520	1812	2,520	For filing a request for reexamination		
Name	—'  ·	1804	920°	1804	920*	Requesting publication of SIR prior to		
The Director is authorized to: (check all that apply)						Examiner action	<u></u>	
		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
Charge fee(s) indicated below, except for the filing fee		1251	110	2251	55	Extension for reply within first month		
to the above-identified deposit account.		1252	420	2252	210	Extension for reply within second	$\vdash$	
FEE CALCULATION		1202	420		210	month		
1. BASIC FILING FEE		1253	950	2253	475	Extension for reply within third month		
Large Entity Small Entity	ļ,	1254	1,480	2254	740	Extension for reply within fourth month		
	Paid	1255	2,010	2255	1,005	Extension for reply within fifth month		
1001 770 2001 385 Utility filing fee 770	)	1401	330	2401	165	Notice of Appeal		
1002 340 2002 170 Design filing fee	——————————————————————————————————————	1402	330	2402	165	Filing a brief in support of an appeal		
1003 530 2003 265 Plant filing fee		1403	290	2403	145	Request for oral hearing		
1004 770 2004 385 Reissue filing fee	·	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1005 160 2005 80 Provisional filling fee		1452	110	2452	55	Petition to revive – unavoidable		
SUBTOTAL (1) (\$)	770	1453	1,330	2453	665	Petition to revive – unintentional		
		1501	1,330	2501	665	Utility issue fee (or reissue)		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1502	480	2502	240	Design issue fee		
Extra Fee from Claims below	Fee .	1503	640	2503	320	Plant issue fee		
Total Claims 20 -20 ** = 0 X = [	0 1	1460	130	1460	130	Petitions to the Commissioner		
Independent		1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)		
Claims 3 -3 ** = 0 X	<u> </u>	1806	180	1806	180	Submission of Information Disclosure Stmt		
Multiple Dependent  Large Entity  Small Entity	0 [	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40	
Fee Fee Fee	·	1809	770	2809	385	Filing a submission after final rejection		
Code (\$) Code (\$) Fee Description						(37 ČFR § 1.129(a))		
1202 18 2202 9 Claims in excess of 20		1810	770	2810	385	For each additional invention to be		
1201 86 2201 43 Independent claims in exce						examined (37 CFR § 1.129(b))		
1203 290 2203 145 Multiple dependent claim, if		1801	770	2801	385	Request for Continued Examination (RCE)		
1204 86 2204 43 Reissue independent cla original patent		1802	900	1802	900	Request for expedited examination of a design application		
1205 18 2205 9 ** Reissue claims in excess over original patent	of 20 and					•		
over original patent			Other fee (specify)					
SUBTOTAL (2) (\$) 0								
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**or number previously paid, if greater, For Reissues, see above								
Camplete (if coelischie)								

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	Michael B. McNeil	Registration No. (Attomey/Agent)	35,949	Telephone	812-333-5355	
Signature	mi	5, (XI		Date	10-22-03	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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